

PART B - FEE(S) TRANSMITTAL

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719 7590 10/27/2004

CATERPILLAR INC.
100 N.E. ADAMS STREET
PATENT DEPT.

PEORIA, IL 61629-6490

01/25/2005 ADDRESSE 00000056 031129 09016739

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA

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Kelly A Umholtz	(Depositor's name)
<i>Kelly A Umholtz</i>	(Signature)
1-18-2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/016,739	01/30/1998	D. MICHAEL GODWIN	1002-0537	7368
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TITLE OF INVENTION: METHOD OF VERIFYING COUPLING OF AN IMPLEMENT TO A WORK MACHINE

97-679-4

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1370	\$300	\$1670	01/27/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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UNDERWOOD, DONALD W	3652	414-723000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Paul J Maginot

2 Michael B McNeil

3 Diana L Charlton

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Caterpillar Inc

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Peoria, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1129 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Dennis C Skarvan

Date

1/15/05

Typed or printed name

Dennis C Skarvan

Registration No.

35,360

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